

*Welcome
to
Nevada Medicaid
and
Nevada Check Up*



“We want you and your family to receive the health care you need.”

Division of Health Care Financing and Policy
1100 E. William Street, Suite 101
Carson City, NV 89701

We have taken reasonable steps to assure the information in this guide was accurate at the time it was written, but should it conflict with Nevada Medicaid's statutes, regulations or policies, the statutes, regulations or policies would prevail.

NMO 1111-E 06/06

WELCOME

Welcome to Nevada Medicaid and Nevada Check Up. We want you and your family to receive the health care you need. This guide will help you understand and use your Nevada Medicaid and Nevada Check Up benefits.

It is important to learn how to use your health care benefits to ensure you receive the care you need.

You must submit an application to determine if you are eligible to receive Nevada Medicaid and Nevada Check Up benefits. To apply for Medicaid, contact your local Division of Welfare and Supportive Services office. The phone numbers are in the resource section of this guide. To apply for Nevada Check Up, call the toll free number in the resource section at the end of this booklet and request an application, or apply online at www.nevadacheckup.com. Nevada Check Up offers applications in both English and Spanish.

Nevada Medicaid and Nevada Check Up help you take responsibility for your own health by reimbursing providers directly for a wide variety of services. To get the most benefit, you should follow the guidelines, use the services wisely, and most importantly, lead a healthy lifestyle.



WHAT ARE NEVADA MEDICAID AND NEVADA CHECK UP?

Nevada Medicaid is a program that provides quality health care services to low-income Nevadans who qualify based on federal and state law. Nevada Medicaid does not reimburse an individual; rather, it sends payments directly to the health care providers for services provided to Medicaid recipients.

Nevada Check Up is a program designed for families who do not qualify for Medicaid, but whose incomes are at or below 200% of the federal poverty level (FPL). Participants in the Nevada Check Up program are charged a quarterly premium based on income.

Nevada Medicaid is often confused with **Medicare**. The basic difference is that eligibility for Nevada Medicaid is based on financial need. Medicare is not based on financial need but is available to almost anyone who has been determined disabled by the federal Social Security Administration or who is age 65 years of age or older. For more information on Medicare, please call the Social Security Administration Helpline toll free at 1-800-772-1213.

WHO IS ELIGIBLE FOR NEVADA MEDICAID AND NEVADA CHECK UP?

To be eligible for Nevada Medicaid you must qualify for a low income eligibility category. Generally, the categories of eligibility are children, pregnant women, families with dependent children, disabled adults, or persons age 65 or older.

You must be financially eligible for the Nevada Medicaid program. The rules for assessing your income and assets vary from category to category and are complex. Your Division of Welfare and Supportive Services caseworker will work with you to evaluate your financial eligibility and the programs that you may be eligible

for. There are special rules for those who live in nursing homes and for disabled children living at home.

To be eligible for Nevada Check Up you must be 18 years of age or younger. Eligibility is based on the total gross income of household members, citizenship/legal residency status and health insurance status. If you are eligible for Nevada Medicaid, you cannot be eligible for Nevada Check Up.

HOW DO NEVADA MEDICAID AND NEVADA CHECK UP WORK?

When your Nevada Medicaid or Nevada Check Up eligibility is determined, you will receive, one time only, a Nevada Medicaid/Nevada Check Up card. The same card is used for both benefit programs. Each family member who is determined eligible will receive their own individual card. **DO NOT THROW THEM AWAY.** You must show your Nevada Medicaid/Nevada Check Up card to your doctor or other health care provider each time you receive medical treatment. Your provider will send the bill directly to Nevada Medicaid for payment. Nevada Medicaid pays for Nevada Check Up health benefits. For some services, Nevada Medicaid may require you to share the cost. Some Nevada Medicaid or Nevada Check Up recipients will be enrolled in a Health Maintenance Organization (HMO) and may receive services through them. HMO members will receive additional information about how to access services. For enrollees not in an HMO, you will need to find providers that are Nevada Medicaid providers and who will accept Nevada Medicaid or Nevada Check Up patients.

HEALTH MAINTENANCE ORGANIZATION (HMO)

The State of Nevada Managed Care Program requires the mandatory enrollment in an HMO of some recipients found eligible for Medicaid or Nevada Check Up. Mandatory HMO

enrollment occurs in urban Clark and Washoe Counties. There are two HMOs in each county to choose from. If you and your family reside in either of these areas, you will receive a letter shortly after you are determined eligible informing you of your choices. You must complete and return the letter within the specified timeframe or you will be automatically assigned to one of the HMOs.

WHEN YOU NEED NEVADA MEDICAID OR NEVADA CHECK UP SERVICES, YOU SHOULD:

- Tell your provider if you have any other type of health care coverage;
- Make sure your health care provider will accept Nevada Medicaid or Nevada Check Up as a health coverage program;
- Make sure the service you receive is covered by Nevada Medicaid or Nevada Check Up;
- Show your health care provider your Nevada Medicaid/Nevada Check Up Recipient Card each time you receive medical treatment;
- Report to your caseworker any change in your income, assets, place of residence, or anything else that could affect your eligibility for Nevada Medicaid coverage;
- Report the following changes to Nevada Check Up immediately:
 - Address and/or telephone number changes (to avoid disenrollment for loss of contact);
 - Pregnancy, births and household composition changes;
 - Child obtains other insurance, including Medicaid;
 - Child dies;
 - Child becomes a resident or inmate of a public institution, or ward of the state;
 - Child gets married or becomes emancipated;

- Pay co-pay amount for some Nevada Medicaid services and drugs; and pay quarterly premiums for Nevada Check Up;
- Pay for your medical care if you get services from someone who is not approved by Nevada Medicaid or Nevada Check Up or services that are not covered by Nevada Medicaid or Nevada Check Up;
- Talk to your health care provider about any problems you have with your medical bills.
- Promptly respond to all requests for additional information to avoid potential loss of coverage.

If you knowingly break Nevada Medicaid or Nevada Check Up rules, or are untruthful about the information on your application, you could lose all your Nevada Medicaid or Nevada Check Up coverage.

WHAT IF I HAVE MEDICAL INSURANCE OR HEALTH COVERAGE?

Generally, Nevada Medicaid is the “payer of last resort.” This means that if you have other health insurance or belong to other programs that can pay a portion of your medical bills, payment will be collected from them first. Nevada Medicaid may then pay all or part of the amount that is remaining. Children with other creditable healthcare coverage are not eligible for Nevada Check Up per Federal Regulations.

This is very important: When you apply for Nevada Medicaid or Nevada Check Up you **MUST** provide verification of any other type of health care insurance or benefits. Your Division of Welfare and Supportive Services caseworker can help you determine if you have any other type of health care coverage.

Other sources of health coverage may include, but are not limited to:

- Private Health Insurance
- Veterans Administration (VA) benefits
- Medicare
- TRICARE (CHAMPUS)
- Medical support from absent parents
- Court judgments or liability settlements for accidents or injuries
- Workers' compensation
- Long-term care insurance
- Access to or enrollment in the Public Employees Benefit Program

BENEFITS COVERED BY NEVADA MEDICAID AND NEVADA CHECK UP

- Ambulance
- Birth Control
- Dental
- Comprehensive Rehabilitation
- Disposable Supplies
- Durable Medical Equipment
- Doctor Visits
- Emergency Room
- EPSDT/Healthy Kids or Preventive /Wellness Care for Children
- Eye Exams and Eyeglasses
- Family Planning
- Hearing Tests
- Home Health Care
- Hospice Care
- Hospital
- Lab and X-ray Services
- Maternity Care
- Medical Supplies/Equipment

- Mental Health
- Nursing Home Services
- Occupational Therapy Services
- Over-the-Counter Drugs with a prescription
- Personal Care Services
- Physical Therapy Services
- Private Duty Nursing
- Prescription Drugs
- Specialists
- Speech and Hearing Services
- Transportation Services
- Waiver Program Services

We want you to find out more about the benefits covered by Nevada Medicaid and Nevada Check Up. The next section will give you details about benefits.

AMBULANCE/TRANSPORTATION

When seconds count call 911 for an ambulance. Nevada Medicaid and Nevada Check Up will cover air and ground ambulance services in an emergency with contracted providers.

BIRTH CONTROL/FAMILY PLANNING

Talk to your doctor or clinic about family planning. You may receive family planning services from any provider who accepts Nevada Medicaid. You do not need a referral. You may receive some types of birth control in your doctor's office. For others, your doctor will write a prescription. The following forms of birth control are covered by Nevada Medicaid:

- Birth Control Pills
- Foams
- Creams
- Sponges

- Diaphragms
- IUDs
- Norplant
- Shots (Depo-Provera)
- Condoms

Under some circumstances, Nevada Medicaid will pay for a woman to get her tubes tied or for a man to have a vasectomy (sterilization). Nevada Medicaid does not pay to reverse these surgeries. You must be 21 years of age or older, and both you and your doctor must sign a “consent” form 30 days before the surgery.

HEALTHY KIDS OR EARLY PERIODIC SCREENING DIAGNOSIS AND TREATMENT (EPSDT)

Healthy Kids or EPSDT is a special benefit for children on Nevada Medicaid and Nevada Check Up. The objective of this program is to keep children healthy. EPSDT covers medical checkups for children. Well child exams include vision and hearing screenings. EPSDT also covers dental checkups. Almost anyone from birth through age 20 who receives Nevada Medicaid can receive EPSDT covered services.

Regular checkups help keep your children healthy. Some problems start before your child looks or feels sick. Your doctor can find and treat these problems early, before they lead to a serious problem.

EPSDT Services include:

- Well child exams by your child’s doctor. A head-to-toe exam that includes health history, eating habits, vision and hearing exams, and a growth and development check;
- Shots (immunizations) to keep your child healthy;

- Dental checkups by your child's dentist. A complete exam and cleaning twice a year. Fluoride treatment and sealants are covered for children;
- Follow up treatment and care if a health problem is found during an exam;
- Benefits that are usually not covered by Nevada Medicaid or Nevada Check Up.

WHEN SHOULD MY CHILD HAVE AN EPSDT CHECKUP?

- Newborns – as soon as possible after birth.
- Babies – ages 1, 2, 4, 6, 9, 12, 15, 18, and 24 months. Shots are due at many of these visits.
- Toddlers – ages 3, 4, and 5. More shots are due at some of these visits.
- Children – ages 6, 8, 10 and 12 years old.
- Teenagers and Young Adults – ages 14, 16, 18 and 20.

If you missed an appointment for one of these ages, take your child in as soon as possible. Make sure you ask for an EPSDT exam and tell your doctor you have Nevada Medicaid or Nevada Check Up coverage. Remember to take your child's shot record with you.

DENTAL BENEFITS

Please see a dentist who accepts Nevada Medicaid or Nevada Check Up. Dental benefits include:

- Adults: Emergency only
- Children: full coverage, limited orthodontia

Your dentist needs prior approval from Nevada Medicaid or Nevada Check Up for some of the benefits.

DOCTOR VISITS

Nevada Medicaid and Nevada Check Up pay for you and/or your children to see the doctor or visit an Urgent Care Clinic when you are having health problems. Most of the time you can get the treatment you need from your primary care doctor. If needed, your doctor may refer you to a specialist.

EMERGENCY ROOM

Use the emergency room when you have a serious medical problem that cannot wait. Waiting could mean permanent harm or death. In an emergency, call 911 or go to the emergency room right away. You do not have to call your doctor first. You will need to call your doctor when the emergency is over. Your doctor must provide any follow up care needed after the emergency.

EYE EXAMS AND EYEGLASSES

Nevada Medicaid and Nevada Check Up cover services for both optometrists and ophthalmologists. An optometrist is trained to examine eyes and prescribe eyeglasses. An ophthalmologist is a medical doctor who specializes in eye diseases and can perform eye surgery.

Your provider will show you a selection of frames that you may choose from that Nevada Medicaid or Nevada Check Up pays in full.

You can choose more expensive eyeglasses; however, you must pay the difference between what Nevada Medicaid and Nevada Check Up pay and how much more the expensive glasses cost. Make sure you sign an agreement in advance if you are going to pay for more expensive glasses.

Contact lenses are only covered if there is a medical reason for them.

HOME HEALTH CARE

Home health care is for people who are homebound and/or for people who cannot go to the doctor's office for needed care but do not need to be in a nursing home. Home health care requires prior approval from Nevada Medicaid and Nevada Check Up.

Some benefits you might receive in your home are:

- Occupational Therapy
- Physical Therapy
- Skilled Nursing Services
- Home Health Care Aides

If you need home health care, talk to your doctor. Your doctor must write an order. Give the order to a home health agency. The home health agency will ask Nevada Medicaid or Nevada Check Up for prior approval.

HOSPICE CARE

Hospice care is for terminally ill individuals. Hospice care helps people to be comfortable when they are dying. Talk to your doctor if you need these services.

HOSPITAL CARE

Nevada Medicaid and Nevada Check Up cover both inpatient and outpatient hospital care. Before you use hospital services get a referral from your doctor.

LAB AND X-RAY SERVICES

Lab and X-ray services are covered by Nevada Medicaid and Nevada Check Up. These services may be available in your doctor's office or your doctor may refer you to another clinic, lab, or hospital for the service.

MATERNITY CARE

If you think you are pregnant, see a doctor as soon as possible. Early maternity care will help you give birth to a healthy baby.

You may choose to see a specialist such as an Obstetrical /Gynecological (OB/GYN) physician or a Certified Nurse Midwife.

Nevada Medicaid covers:

- Prenatal visits, lab work, and tests you may need (such as an ultrasound)
- Charges for labor and delivery
- Anesthesia (pain treatment)
- The hospital stay
- Your 6 week checkup after the baby is born

You are allowed to stay in the hospital for 48 hours after a normal birth and 96 hours after a C-section. You can choose to have a shorter stay if you and your doctor agree.

Your baby may be covered by Nevada Medicaid for the first year of birth if you are eligible for Medicaid at the time of your baby's birth. Contact your Division of Welfare and Supportive Services case worker as soon as possible to report the birth of your baby.

Nevada Check Up requires notification of pregnancy prior to birth and notification of birth within 14 days of delivery in order to be eligible for coverage from the date of birth. If the mother has

temporary coverage for the newborn and they are determined eligible for Nevada Check Up, coverage will begin the first day of the next administrative month. The newborn cannot receive coverage that pre-dates the other family member's earliest current enrollment.

Nevada Check Up provides ongoing access to health care for children as long as income levels are met at annual redeterminations, premium payments are current, and the child continues to meet other eligibility criteria.

MEDICAL SUPPLIES/EQUIPMENT

Nevada Medicaid and Nevada Check Up cover many medical supplies. For example, some supplies you may need are:

- Disposable diapers or pads
- A wheelchair
- Prosthetic devices
- Wound care supplies
- Oxygen

Talk to your doctor if you need medical supplies. Your doctor will write a prescription and give the order to a medical supply company. The medical supplier must get prior approval from Nevada Medicaid and Nevada Check Up for some items. Nevada Medicaid and Nevada Check Up will reimburse the provider for the supplies and equipment.

MENTAL HEALTH

Mental health services are those techniques, therapies, or treatments provided to an individual who has an acute, clinically identifiable psychiatric disorder or chronic psychiatric disorder. Some of the services provided include:

- Inpatient - Outpatient services
- Psychiatric Evaluations

- Medication Management
- Psychological Testing
- Case Management
- Individual and Group Therapy
- Emergency care in a hospital ER
- Crisis Intervention

MIDWIFE SERVICES

You may choose to see a midwife for your pregnancy. You must choose a certified and licensed midwife who is a Nevada Medicaid or Nevada Check Up provider. Some certified midwives can deliver babies in the hospital in case of an emergency during delivery.

NURSING FACILITY

Nevada Medicaid and Nevada Check Up cover nursing home care. Long term care is when a person stays in a nursing home more than 30 days.

Short term care is when a patient goes from a hospital to a nursing home to continue recovering when the stay is less than 30 days.

Prior authorization is a requirement.

OCCUPATIONAL THERAPY

Occupational therapy may be covered for some serious problems. Occupational therapy can be ordered by your doctor if it will improve your medical condition. The order is then submitted to an occupational therapist who accepts Nevada Medicaid and Nevada Check Up.

OUT-OF-STATE NURSING FACILITY

Out-of-State nursing facility services are offered to Nevada residents when:

- An individual is unable to find placement in a Nevada nursing facility;
- An individual's residence is located on or near a Nevada border and the residents of that community customarily seek medical service from out-of-state providers.

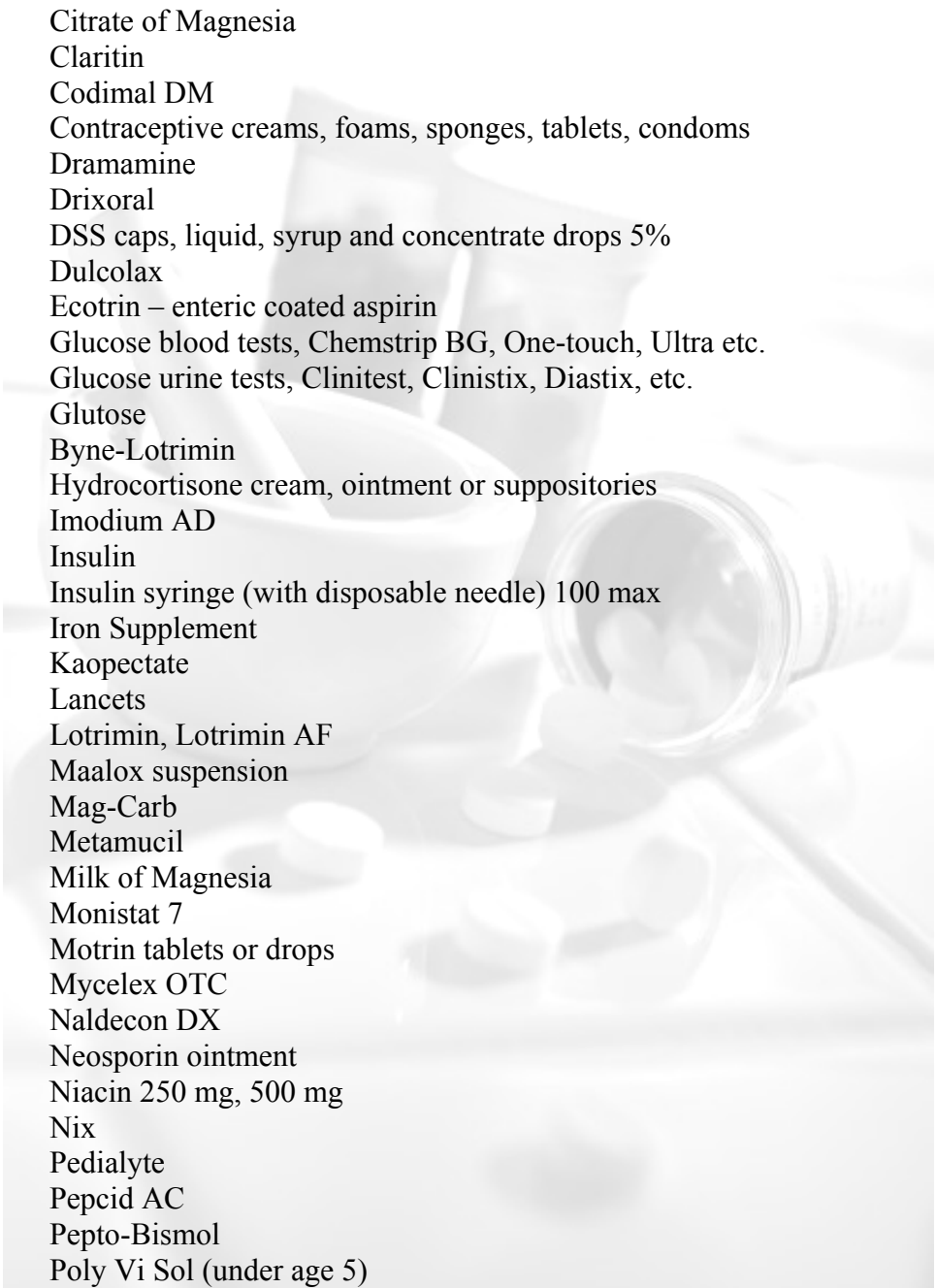
Prior authorization is a requirement.

OVER-THE-COUNTER DRUG LIST

Nevada Medicaid and Nevada Check Up cover many over-the-counter medicines, such as aspirin, Tylenol, cough and cold remedies. You need a prescription from your physician before for Nevada Medicaid or Nevada Check Up will reimburse the pharmacy for these types of medicines.

Listed are some common brand names to help you know what the medications are. Your prescriptions will be filled with a generic brand. This list does not include all medications covered by Nevada Medicaid and Nevada Check Up.

Acetone tests
Actifed
Alcohol swabs
Antacid liquid & tablets (Tums)
Aspirin
Axiid AR
Benadryl
Benylin
Buffered aspirin
Calcium tablets (but not oyster shell)
Chlor-trimeton



Citrate of Magnesia
Claritin
Codimal DM
Contraceptive creams, foams, sponges, tablets, condoms
Dramamine
Drixoral
DSS caps, liquid, syrup and concentrate drops 5%
Dulcolax
Ecotrin – enteric coated aspirin
Glucose blood tests, Chemstrip BG, One-touch, Ultra etc.
Glucose urine tests, Clinitest, Clinistix, Diastix, etc.
Glutose
Byne-Lotrimin
Hydrocortisone cream, ointment or suppositories
Imodium AD
Insulin
Insulin syringe (with disposable needle) 100 max
Iron Supplement
Kaopectate
Lancets
Lotrimin, Lotrimin AF
Maalox suspension
Mag-Carb
Metamucil
Milk of Magnesia
Monistat 7
Motrin tablets or drops
Mycelex OTC
Naldecon DX
Neosporin ointment
Niacin 250 mg, 500 mg
Nix
Pedialyte
Pepcid AC
Pepto-Bismol
Poly Vi Sol (under age 5)

Prilosec
Prophylactics or condoms, male and female
Rid
Robitussin and Robitussin DM
Sudafed
Tagamet HB
Tavist D
Tavist 1
Tri Vi Sol (under age 5)
Triaminic line
Tylenol
Zantac 75

If you are on Medicare and Medicaid, most of your prescriptions must be provided by Medicare. Medicaid will cover the excluded items from Medicare including, over-the-counters, benzodiazepines, barbiturates, vitamins, and cold and cough medications.

PERSONAL CARE SERVICES

Personal care services such as bathing, feeding and dressing may be covered by Nevada Medicaid and Nevada Check Up. This benefit is for people who cannot perform these activities for themselves. Personal care is provided by a Personal Care Assistant (PCA) through an agency. Talk to the Medicaid District Office closest to you if you think you need these services. The Personal Care Service Provider agency must get prior approval from Nevada Medicaid and Nevada Check Up prior to providing services.

PHYSICAL THERAPY

Physical therapy may be covered for some serious problems. Physical therapy can be ordered by your doctor if it will improve

your medical condition. The order is then submitted to a physical therapist who accepts Nevada Medicaid and Nevada Check Up.

PRESCRIPTION DRUGS

Many prescription drugs are covered by Nevada Medicaid and Nevada Check Up. If a generic brand is unavailable, then you will receive the brand name. Some prescriptions require prior authorization.

SPEECH AND HEARING SERVICES

If you have serious speech or hearing problems, see your doctor. Your doctor can refer you to a speech therapist or an audiologist. Some services covered by Nevada Medicaid and Nevada Check Up are:

- Hearing tests
- Hearing aids
- Batteries for your hearing aid
- Speech therapy

SMOKING CESSATION

Products to help you stop smoking are covered under Nevada Medicaid and Nevada Check Up. You will need to get a prescription from your doctor and take it to a pharmacy to be dispensed. Examples of products are prescription and over-the-counter medications, patches, lozenges, and inhalers.

TRANSPORTATION SERVICES

Non-Emergency Transportation (NET) for Nevada Medicaid and Nevada Check Up is provided through a transportation management company, LogistiCare. LogistiCare provides non-emergency transportation to medical services only. It is

recommended that you arrange for transportation at least 48 hours in advance. For all NET services please contact:

- Reservation Line 888-737-0833
- Where's My Ride? 888-737-0829

WAIVER PROGRAMS

Individuals with special needs may qualify for Nevada Medicaid through special waiver programs. If you qualify, you may receive enhanced benefits. Waivers allow Nevada Medicaid to pay for support and services to help people live safely in their own homes or community.

The services may include:

- Emergency response service
- Homemaker service
- Group home
- Day treatment center
- Adult day care
- Family Support
- Respite care for family members who need a break from caring for disabled or elderly family members
- Someone to help you work at a job
- Transportation to places other than a doctor's office or clinic

These programs limit the number of people who may be served. For information about how to apply for one of the waiver programs, call the Nevada Medicaid District Office in your area.

OTHER THINGS YOU SHOULD KNOW

WHAT IS MEDICAID ESTATE RECOVERY (MER) PROGRAM?

In 1993 Congress mandated states would have an estate recovery program. The purpose of the recovery program is to recoup Medicaid dollars paid on behalf of those receiving medical benefits paid for by Medicaid. The recovery is only done after the death of the Medicaid recipient and only if there is no surviving spouse, children under 21, or disabled children of any age. The person receiving benefits must be over the age of 55 or a permanent resident of a care facility at the time benefits were received. You may call the Nevada Medicaid Central Office number listed in the resource section of this guide if you have questions.

PRIVACY OF INFORMATION

Your health information is personal and private. The Division of Health Care Financing and Policy (DHCFP) is required by law to protect the privacy of the information we have about you. We receive this information when we determine your eligibility for benefits. We also receive medical information from your doctors (and other health care providers), clinics, labs, and hospitals in order to approve care and pay for your health services. We use health information about you for treatment, to obtain payment for treatment, for administrative purposes, and to evaluate the quality of care you receive. Federal privacy laws require that we provide you our Notice of Privacy Practices (NPP) that explains our legal duties and privacy practices when dealing with your personal health information. This NPP is provided to you when you receive your Medicaid/Nevada Check Up card. You may obtain a copy of our NPP information form from our Medicaid offices and our web site at: www.dhcfp.state.nv.us.

PERSONAL REPRESENTATIVE

You may designate an individual of your choosing to represent you and your interests with the Division of Health Care Financing and Policy (DHCFP). This individual is known as your “Personal Representative.” Your personal representative may have access to your health information and make medical decisions for you relating to your care. You may obtain a form to designate someone as your “Personal Representative” from your Nevada Medicaid District Office or by calling the Nevada Check Up toll free number listed in the resource section of this guide, or at our website: www.dhcfp.state.nv.us.

SHOWING UP FOR YOUR APPOINTMENTS

It is very important to arrive at your appointment several minutes before the scheduled time. If you are unable to make it to your health care provider’s office on time, you need to call as soon as you can (at least 24 hours beforehand) to let them know that you are unable to keep your appointment. Your provider has reserved time for you in order to treat you. Please be courteous to your provider and either arrive several minutes before your scheduled appointment or give at least a full day’s notice if you must cancel.

OUT-OF-STATE MEDICAL COVERAGE

Nevada Medicaid and Nevada Check Up will cover emergency services if you or your family are temporarily outside of Nevada if the provider of care agrees to participate in Nevada’s Medicaid or Check Up Program and to bill Nevada Medicaid or Nevada Check Up. No payments are made directly to recipients for service costs incurred out of state. Rules for out-of-state care may be different if your coverage is through an HMO. If you are enrolled in an HMO, contact them for their procedures regarding out-of-state treatment.

If you receive emergency medical services out of state from a provider not enrolled in Nevada Medicaid or Nevada Check Up, tell the out-of-state providers to contact our fiscal agent, First Health Services Corporation. This information can be found at their website: <http://nevada.fhsc.com>.

WHAT YOU NEED TO KNOW ABOUT YOUR PROVIDERS' RESPONSIBILITIES

YOUR NEVADA MEDICAID OR NEVADA CHECK UP HEALTH CARE PROVIDER IS RESPONSIBLE FOR:

- Getting payment from Nevada Medicaid or Nevada Check Up and/or your health insurance company;
- Accepting the Nevada Medicaid or Nevada Check Up rates for your health care status. Nevada Medicaid or Nevada Check Up will reimburse a specific amount for each health care service; your provider cannot charge you or Nevada Medicaid or Nevada Check Up more for the service;
- Collecting the co-pay amount you are required to pay;
- Requesting prior authorization for some services.

Health care providers who knowingly charge Nevada Medicaid or Nevada Check Up for services that were not given, who neglect or abuse patients, or give poor quality care may be subject to legal action. If you believe this has happened, you may write the Division of Health Care Financing and Policy, at 1100 East William Street, Carson City, NV 89701.

WHAT IS "PRIOR AUTHORIZATION"?

Some services under Nevada Medicaid or Nevada Check Up must be "prior authorized". This means that you must receive approval from Nevada Medicaid or Nevada Check Up before using a service. Your health care provider is responsible for requesting prior authorization for services he/she will perform.

Transportation must also be prior authorized. It is the provider's responsibility to get authorization for your travel. If your request for services is denied and the provider has not been authorized, call the number on the back of your card.

Nevada Medicaid and Nevada Check Up, like most insurance companies in Nevada, require prior authorization for costly drugs. Your physician or pharmacist can tell you if the drugs you currently take are available with or without prior authorization. Your physician will be required to request prior authorization if he/she chooses to prescribe a drug for you that is not included on Nevada Medicaid's Preferred Drug List.



CLINIC IMMUNIZATION RECORD

NAME _____

BIRTHDATE _____

GENDER _____

Date	Vaccine			
	DTaP	DT	Td	1
				2
				3
				4
				5
				6
	IPV	OPV		1
				2
				3
				4
	Hib			1
				2
				3
				4
	Hep B			1
				2
				3
				4
	PCV7			1
				2
				3
				4
	MMR			1
				2
	Varicella			1
				2
	Hep A			1
				2
	PPV23			1
	Influenza			1
				2
	Other			



IMPORTANT PHONE NUMBERS AND LOCATIONS YOU SHOULD KNOW ABOUT

Nevada Medicaid Central Office (NMO)
1100 East William Street, Suite 101
Carson City, Nevada 89701
Telephone: (775) 684-3600
Las Vegas area: 702-486-1550
www.dhcfp.state.nv.us

Nevada Check Up Central Office
1000 East William Street, Suite 200
Carson City, Nevada 89701
Telephone: (775) 684-3777
Toll-free telephone number: 1-877-543-7669
Fax: (775) 684-8792
www.nevadacheckup.com

NEVADA MEDICAID DISTRICT OFFICES

Carson City	(775) 684-3651
Elko	(775) 753-1191
Henderson/Las Vegas	(702) 486-1550
Reno	(775) 688-2811
Transportation	1-800-737-0833

DIVISION OF WELFARE AND SUPPORTIVE SERVICES
DISTRICT OFFICES

CALL CENTERS:

North - (775) 684-7200

South - (702) 486-5000 / 486-1646

Carson City District Office	755 N. Roop Street, #201, 89701
Elko District Office	850 Elm Street, 89801
Ely Office	725 Avenue K, 89301
Fallon District Office	111 Industrial Way, 89406
Hawthorne Office	1000 "C" Street, 89415
Henderson	538 S. Boulder Highway, Suite A, 89015
Las Vegas – Belrose	700 Belrose Street, 89107
Las Vegas – Cambridge	3900 Cambridge Street, #202, 89119
Las Vegas – Flamingo	3330 E. Flamingo Road, #55, 89121
Las Vegas – Nellis	611 N. Nellis Blvd., 89110
Las Vegas – Owens	1040 W. Owens Avenue, 89106
Pahrump Office	1840 Pahrump Valley Blvd., Unit A, 89048
Reno – Northern PDC	680-690 S. Rock Blvd., 89502
Reno District Office	3697 Kings Row, 89503
Winnemucca Office	475 W. Haskell Street, #6, 89445
Yerington Office	215 W. Bridge Street, #6, 89447

TTY Phone Numbers:

North - (775) 684-0760

South - (702) 486-8588

Website: www.welfare.state.nv.us



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